



SOMERVILLE HISTORIC PRESERVATION COMMISSION
93 HIGHLAND AVENUE – CITY HALL
SOMERVILLE, MA 02143
617-625-6600 X 2500
www.ci.somerville.ma.us

Application Form For Commission Membership

Date: _____

Name: _____

Address: _____

Phone#s Home: _____ **Work:** _____ **Cell:** _____

E-Mail Address: _____

ARE YOU A RESIDENT/OWNER of HISTORIC DISTRICT PROPERTY? (a certain number of Commission Members are required to be residents of historic properties.) **Yes**____ **No**____ **Since When?**_____

WHAT IS YOUR PROFESSIONAL BACKGROUND, WORK AND EDUCATIONAL EXPERIENCE? (Membership requirements include architect, architectural historian, real estate broker, city planner, lawyer, building contractor or tradesperson, landscape architect, and interested citizen members.) Please describe or attach current resume.

WHY WOULD YOU LIKE TO BE A MEMBER OF THE SOMERVILLE HISTORIC PRESERVATION COMMISSION? _____

WHAT PARTICULAR ISSUES WOULD YOU LIKE TO SEE ADDRESSED?

WHAT SKILLS AND TALENTS WOULD YOU BRING TO THE COMMISSION?

WOULD YOU BE ABLE TO COMMIT YOURSELF TO MONTHLY MEETINGS AND SITE VISITS AND REGULAR COMMITTEE ACTIVITIES? ANY SCHEDULING LIMITATIONS?

ADDITIONAL COMMENTS: _____

If you have any questions, please call the Historic Preservation Commission Staff at 617-625-6600 ext. 2500 or e-mail bwilson@ci.somerville.ma.us. Thank you for your interest!